

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | M | CFS | 10/28 |
| FORMALITY REVIEW | JM | JC 864 | 12/6/00 |
| RESPONSE FORMALITY REVIEW | AM | JC SBU | 04-07-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
staple additional sheet here

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